LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619) POSTED
Page 1 of 2 age(s)
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2006 JAN -6 AM 9: 40

(Type or print clearly in black ink) See instructions at bottom of page

Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282

Lobbyist's name and permanent business address	Date prepared	Period cov	ered	
BEN WOLFINGER 5500 GOVERNMENT WAY / BOX 9000	01-04-06	KX	year endir	ng
COEUR D'ALENE, IDAHO 83816-9000		(Mo.)	(Day)	(Yr.)
		12	31	05

COEU	IR D'ALI	ENE, IDAH	ю 83816–9000		i			(Mo.) 12	(Day)	(Yr.) 0.5
Item	Totals	of all reportab	le expenditures made or	inquered by Lobb	wist or b	v I abbuist's Empl	aver on behalf o		J	
Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Reimbursed Personal Living and Travel * Total Amount for Item 3, at bottom of page.)								yer. 		
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		All Employers	Employer No.	.1	Employer No. 2	Employer No. 3		Employer No. 4		
Enterta Food a	inment nd Refreshm	nent	\$ _169.15	\$ <u>169.15</u>	\$		\$		\$	
Living	Living Accommodations		364.12	364.12	_ .					
Advert	ising		0	0						
Travel	Travel		740.94	740.94	.					
Telepho	one		0	0						
Other I	Other Expenses or Services 46.84		46.84	46.84						
	Total \$ 1,321.05		\$ 1,321.0)5 \$		\$		\$		
*			 s you are reporting for requ					ould be e	ntered on Pa	ge 1.
Item The totals of each expenditure of more than fifty dollars (\$50) for a 2 Date Place A					legislator or other holder of public office. Names of Legislators & Public Officials in Group					10
	Continued on									
Continued on attached page(s)					ltem	Employer(s) Name(s) and Address(es)				
67-6	Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.				3 No.1	KOOTENAI COUNTY SHERIFF'S OFFICE 5500 GOVERNMENT WAY / BOX 9000 COEUR D'ALENE, IDAHO 83816-9000				
Fili	Filing deadline: Annual report is due on January 31st.			No.2						
TO BE FILED WITH: Ben Y sursa Secretary of State PO Box 83720				No.3						

No.4

Item 4 Expenditures made by the lobbyist or by the lobbyist's employer personal property to any Legislator, or for or on behalf of any legi					loyer in the nature of contributions of money or other tangible or intangible y legislator.				
	D	ate	Amount			Name of Legislator Receiving	or Bene	fited	
item 5	or Ho the L	obbyist w	Resolution or other	_	Codi 01	LEGISLATIVE SUE e Subject Agriculture, horticulture,		IDENTIFICATION Subject Health service, medicine, drugs	
(from	t Code table)	S101 S105 S105 H 15	7 8 7 1 03 04	Appropriation Bill Number and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts	18 19 20 21 22 23 24 25 26 27 28 29 30	and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
CERT	PICATI	ON: The	are by certify that the	e above is a true, complete and	6	Employer No. 2 signature Employer No. 3 signature	SA	- 4 - 06 Date	

Employer No. 4 signature

Date